

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------|
| FEE DETERMINATION         |          |        |      |
| O.I.P.E. CLASSIFIER       |          |        |      |
| FORMALITY REVIEW          |          |        |      |
| RESPONSE FORMALITY REVIEW |          |        |      |

# INDEX OF CLAIMS

✓ Rejected  
 = Allowed  
 - Canceled  
 + (Through numeral) Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

| Claim | Date     | Claim | Date     | Claim | Date     |
|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original |
| 1     | ✓        | 51    |          | 101   |          |
| 2     | ✓        | 52    |          | 102   |          |
| 3     |          | 53    |          | 103   |          |
| 4     |          | 54    |          | 104   |          |
| 5     |          | 55    |          | 105   |          |
| 6     |          | 56    |          | 106   |          |
| 7     |          | 57    |          | 107   |          |
| 8     |          | 58    |          | 108   |          |
| 9     |          | 59    |          | 109   |          |
| 10    |          | 60    |          | 110   |          |
| 11    |          | 61    |          | 111   |          |
| 12    |          | 62    |          | 112   |          |
| 13    |          | 63    |          | 113   |          |
| 14    |          | 64    |          | 114   |          |
| 15    |          | 65    |          | 115   |          |
| 16    |          | 66    |          | 116   |          |
| 17    |          | 67    |          | 117   |          |
| 18    |          | 68    |          | 118   |          |
| 19    |          | 69    |          | 119   |          |
| 20    | ✓        | 70    |          | 120   |          |
| 21    |          | 71    |          | 121   |          |
| 22    |          | 72    |          | 122   |          |
| 23    |          | 73    |          | 123   |          |
| 24    |          | 74    |          | 124   |          |
| 25    |          | 75    |          | 125   |          |
| 26    |          | 76    |          | 126   |          |
| 27    |          | 77    |          | 127   |          |
| 28    |          | 78    |          | 128   |          |
| 29    |          | 79    |          | 129   |          |
| 30    |          | 80    |          | 130   |          |
| 31    |          | 81    |          | 131   |          |
| 32    |          | 82    |          | 132   |          |
| 33    |          | 83    |          | 133   |          |
| 34    |          | 84    |          | 134   |          |
| 35    |          | 85    |          | 135   |          |
| 36    |          | 86    |          | 136   |          |
| 37    |          | 87    |          | 137   |          |
| 38    |          | 88    |          | 138   |          |
| 39    |          | 89    |          | 139   |          |
| 40    |          | 90    |          | 140   |          |
| 41    |          | 91    |          | 141   |          |
| 42    |          | 92    |          | 142   |          |
| 43    |          | 93    |          | 143   |          |
| 44    |          | 94    |          | 144   |          |
| 45    |          | 95    |          | 145   |          |
| 46    |          | 96    |          | 146   |          |
| 47    |          | 97    |          | 147   |          |
| 48    |          | 98    |          | 148   |          |
| 49    |          | 99    |          | 149   |          |
| 50    |          | 100   |          | 150   |          |

If more than 150 claims or 10 actions  
 staple additional sheet here

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